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CONFIRMATION NO. 3584

<b>SERIAL NUMBER</b> 10/506,743	<b>FILING OR 371(c) DATE</b> 09/03/2004 <b>RULE</b>	<b>CLASS</b> 424	<b>GROUP ART UNIT</b> 1643	<b>ATTORNEY DOCKET NO.</b> X-15450
<b>APPLICANTS</b> Joanne Sloan Lancaster, Indianapolis, IN;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/US03/06155 03/12/2003 which claims benefit of 60/367,054 <u>03/21/2002</u> and claims benefit of 60/409,768 09/10/2002				
<b>** FOREIGN APPLICATIONS *****</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <u>Allowance</u> <u>Initials</u>		<b>STATE OR COUNTRY</b> IN	<b>SHEETS DRAWING</b> 0	<b>TOTAL CLAIMS</b> 38
				<b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b> 25885				
<b>TITLE</b> Antagonistic anti-hfas ligand human antibodies and fragments thereof				
<b>FILING FEE RECEIVED</b> 1140	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	